

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-------------------------------|-------------|----------------|
| FEE DETERMINATION | <i>[Handwritten initials]</i> | | <i>8/10/01</i> |
| O.I.P.E. CLASSIFIER | <i>[Handwritten initials]</i> | <i>1091</i> | <i>8-10-01</i> |
| FORMALITY REVIEW | <i>[Handwritten initials]</i> | | |
| RESPONSE FORMALITY REVIEW | | | |

1091

INDEX OF CLAIMS

- ✓ Rejected
- Allowed
- (Through numeral)... Canceled
- ⊖ Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet her

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10/1/8
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